

Jefferson Pilot
PO Box 21008
Greensboro, NC 27420

September 20, 1993

Attention: Robert W. Maxwell
Supervisor of Claims

RE: Policy H-493029 & H-538069

Dear Mr. Maxwell:

In response to your letter of September 15, 1993, I am providing the name of my tax accountant for your files:

Thomas M. Wanner
Mullen, Wanner & Miller, Inc.
11175 Reading Rd.
Cincinnati, OH 45241

With regard to your request for names and addresses of the firms which I represent, I believe that it is in the best interests of my business and Jefferson Pilot that these firms not be contacted in matters that directly or indirectly pertain to my health. There is the potential for one or more of my contracts to be cancelled, if business decisions are made during this time of temporary disability. This would likely be costly to Jefferson Pilot as well as Kearney Associates, Inc.

Because my contracts are corporate contracts with my principals, I am not obligated to share with these firms information concerning health related issues of key people in my organization (Kearney Associates, Inc.) just as they are not obligated to share health related information concerning their key people.

I have recently been examined by a neurosurgeon and an orthopedic surgeon concerning the herniated disc confirmed by a MRI scan. I am seriously considering surgery to correct the ruptured disc and hope to be fully recovered in a few months.

My accountant can provide Jefferson Pilot with any information needed to verify income statements which I have provided.

Thank you for the courteous and professional manner in which you have handled my claim. Please call or write to me if I can be of further assistance.

Very truly yours,


Christopher L. Kearney

2687

September 08, 1993

Chris Kearney
12168 Village Woods Drive
Cincinnati, OH 45241

RE: Policy H-493029 & H-538069

Dear Mr. Kearney

Thank you for your correspondence asking about the waiver of premium under the residual provision of your above two policies.

Since the residual benefit is not considered to be total disability we would not be able to apply the waiver of premium to your policy. This provisions applies only to a total disability under the regular benefits of the policy.

If you have any questions or need additional information, please let us know.

Sincerely

Harold D. Shelton
Manager, Policy Service & Claims
IHI Adm Dept. #4170

HDS/fj

Mr. Robert W. Maxwell
Supervisor of Claims
Jefferson-Pilot
PO Box 21008
Greensboro, NC 27420

Nov. 30, 1994

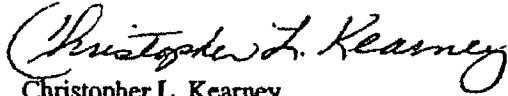
RE: Policy H-493029 & H-538069

Dear Mr. Maxwell:

Per your request, I am enclosing copies of 1992 and 1993 tax returns and W-2s. Also, per your request, I have enclosed a statement from my accountant containing earnings during 1994.

I received your letter, dated November 8, 1994, on November 26th. The envelope was postmarked November 22, 1994. You may want to check with your Post Office or Mail Dept. to avoid delays in the future. I have mailed this letter and information to you by next day delivery so that you can process my claim ASAP. Thank you.

Very truly yours,


Christopher L. Kearney

2714

Mr. Robert W. Maxwell
Supervisor of Claims
Jefferson-Pilot
PO Box 21008
Greensboro, NC 27420

Nov. 29, 1994

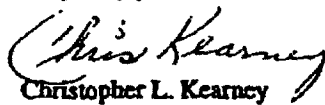
RE: Policy H-493029 & H-538069

Dear Mr. Maxwell:

Per your request, I am enclosing copies of 1992 and 1993 tax returns and W-2s. Also, per your request, I have enclosed a statement from my accountant containing earnings during 1994.

I received your letter, dated November 8, 1994, on November 26th. The envelope was postmarked November 22, 1994. You may want to check with your Post Office or Mail Dept. to avoid delays in the future. I have mailed this letter and information to you by next day delivery so that you can process my claim ASAP. Thank you.

Very truly yours,


Christopher L. Kearney

EX-113
Monday, October 31, 1994

8:12 AM

From:

Name: Chris Kearney
Company: Kearney Associates, Inc.
Phone: (513) 769-5885
Fax: (513) 769-0818

To:

Name: Mr. Harold D. Shelton
Company: Jefferson Pilot- Claims Dept.
Phone: (910) 691-3000
Fax: (910) 691-4254

Total number of pages, including cover: 5

Message:

Please process the following claim. I will be mailing the originals to you today.

For your information, my accountant is now:

Ed Thielen
Thielen & Company
10999 Reed Hartman Hwy.
Cincinnati, OH 45242

Also, besides treatment from Dr. Lehenbauer, I have been treated by Dr. Donna Judd from January, 1994 through the present.



February 23, 1994

Equifax Services Inc.
Sixth Floor
644 Linn Street
P.O. Box 145492
Cincinnati, Ohio 45250-5492
(513) 579-1911

Jefferson Pilot Life Insurance Company
P O Box 21008
Greensboro, NC 27401

Attention: Phyllis J. Harden

Re: Christopher L. Kearney - Your File Number: H-493029 & H-538069
Date of birth: Redacted Dates of Disability: 02/05/93 to present.
Nature of Disability: Lumbosacral spine sprain with suspicion of disc involvement.

Dear Phyllis:

As discussed in our telephone conversation of 02/22/94, we are concluding handling of this case. During the course of our surveillance your subject, Christopher L. Kearney, was at his office for a total of four hours for the two days of investigation. It should be noted that on both of the days he was observed, the subject was carrying a briefcase and this is a one man office. When he is not present, an answering machine picks up all messages. The possibility does exist that he continues to work out of his home, to go to the office only to retrieve messages.

During observations your claimant walked in a smooth and fluent manner, he did not use any type of medical source equipment nor was any type of back brace observed.

If you should have any questions regarding this surveillance or would like for anything further to be conducted, please contact me at (513)352-5680.

Again, thank you for using Equifax Services.

Sincerely,

Andrew E. Huy, Jr.
Surveillance Specialist
Cincinnati Regional Office

AEH/ejc

2734

E Q U I F A X
Claim Insurance Services

CONFIDENTIAL

SURVEILLANCE CLAIM

Acct: 405251

Cl/Pol #: H-493029 & H-538069
Requestor: PHYLLIS J. HARDEN
Assured:

Report On: KEARNEY, CHRISTOPHER L
Address:

Redacted

Occup: NOT SHOWN
Empl : KEARNEY ASSOCIATES, INC.
SSN: - -
DOB: Redacted

Report From: CINCINNATI
Phone #: (513)352-5600
FAX #: (513)352-5655
Dates: 02/24/94-02/11-02/08
Date Invest:

S T A T U S

Final Report

DATES OF INVESTIGATION: 02/17/94 THROUGH 02/21/94.

C I R C U M S T A N C E S

DATE OF ISSUE: 05/28/90. AMOUNT OF INSURANCE: \$1,062.50.
DATES OF DISABILITY: 02/05/93 TO PRESENT.
NATURE OF DISABILITY: LUMBOSACRAL SPINE SPRAIN WITH SUSPICION OF DISC INVOLVEMENT.

C L A I M H I S T O R Y - N O N E

S U M M A R Y

Surveillance was conducted on the above captioned claimant on 02/17/94, 02/18/94 and 02/21/94. On 02/17/94 there were no observations of Christopher L. Kearney; however, on 02/18/94 and 02/21/94 he was observed departing his home at approximately 8:30 AM on both days and arriving at his office shortly thereafter. He then departed his office at approximately 11:00 AM on both days and drove directly home.

During the above observations your subject did not appear to be in any type of pain, noting that he is using no type of medical support equipment nor was any type of brace visible. All movements were done in a smooth and fluent manner.

On both days, after returning to his residence, the subject remained there for the remainder of the day. Although it was noted that he did carry a briefcase to and from his office.

I N V E S T I G A T I O N

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Acct: 405251 QB: H-493029 & H-538069
Name: KEARNEY, CHRISTOPHER L
Claim Investigation Report (Continuation)

Page 2

POLICE NOTIFICATION: The Sharonville Police Department and the Blue Ash Police Department were notified of this surveillance.

PHOTO/VIDEO DOCUMENTATION: 35mm photos were obtained during the course of this investigation.

WEATHER CONDITIONS: On 02/17/94 and 02/18/94 it was clear with temperatures in the 40's. On 02/21/94 it was misty, foggy and cloudy with temperatures in the 40's.

EQUIPMENT USED: VHS Camcorder. 35mm Camera with 300mm Zoom Lens. Binoculars. Personal Vehicle.

S U R V E I L L A N C E

CHRISTOPHER L. KEARNEY

Redacted

THURSDAY - FEBRUARY 17, 1994

12:30 PM

Arrive in area of subject's residence. No vehicles are observed parked in the driveway; however, the garage door is closed. No activity is noted; however, it is determined that your subject is present at his residence.

12:31 PM through 4:30 PM

No activity or change is observed. Handling is terminated for this date.

FRIDAY - FEBRUARY 18, 1994

7:00 AM

Arrive in area of subject's residence. No vehicles are observed parked in the driveway; however, the garage doors are closed. It has been determined that the subject is present at his residence.

7:01 AM through 8:28 AM

No activity or change is observed.

8:29 AM

Subject's garage door opens and subject departs, driving the previously mentioned Pontiac. He drives directly to his office, parks in the rear of the building, and enters the building.

8:40 AM through 10:56 AM

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Acct: 405251 QB: H-493029 & H-538069
Name: KEARNEY, CHRISTOPHER L
Claim Investigation Report (Continuation)

Page 3

Subject remains inside the office.

10:57 AM

Subject departs the office and drives directly home.

11:22 AM through 4:20 PM

Subject remains inside his residence. Handling is terminated for this date.

MONDAY - FEBRUARY 21, 1994

8:30 AM

Arrive in the area of subject's office. Subject is not present at this time; however, the investigator elects to remain in the area to await his arrival.

8:31 AM through 9:28 AM

No activity or change is observed.

9:29 AM

Subject arrives at the office complex driving the aforementioned Pontiac. He parks in the rear of the building and walks inside.

9:30 AM through 10:56 AM

Subject remains inside his office.

10:57 AM

Subject departs his office, walks to his Pontiac and departs the area. He drives to his residence.

11:13 AM through 4:00 PM

No activity or change is observed. Subject remains inside his residence. Handling is terminated for this date.

DATE CASE RECEIVED:

02/11/94

DATE CASE COMPLETED:

02/23/94

Thank you for using Equifax Services.

Andrew E. Huy, Jr.
Surveillance Specialist
Phone (513)352-5604

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Acct: 405251 QB: H-493029 & H-538069
Name: KEARNEY, CHRISTOPHER L
Claim Investigation Report (Continuation)

Page 4

AEH/ejc



Confidential

ACCOUNT NUMBER: 405-251

REQUESTOR: PHYLLIS J. HARDEN

REPORT ON: KEARNEY, CHRISTOPHER L.

FILE IDENTIFICATION: H-493029 & H-538069

CLAIM REPORT

PREPARED BY: ANDREW E. HUY, JR.
SURVEILLANCE SPECIALIST

OFFICE: CINCINNATI

TELEPHONE #: (513)352-5680

2739



February 16, 1994

Equifax Services Inc.
Sixth Floor
644 Linn Street
P.O. Box 145492
Cincinnati, Ohio 45250-5492
(513) 579-1911

Jefferson-Pilot Life Insurance Company
P. O. Box 21008
Greensboro, NC 27401

Attention: Phyllis J. Harden

Re: Christopher L. Kearney - Your File #H-493029 & H-538069
Date of Birth: Redacted - Dates of Disability: 02/05/93 to present.
Nature of Disability: Lumbosacral spine sprain with suspicion of disc involvement.

Dear Phyllis:

This is to confirm our telephone conversation of Monday, 02/14/94, at which time authorization was granted for an investigation to be conducted on the above listed claimant.

As requested, we will be conducting two days of surveillance in an effort to document the claimant's work activities.

As agreed, we will be working within a budget of \$1,000.00. Due to the nature of this type of investigation we cannot guarantee that your claimant will be involved in activities that are inconsistent with his disability. Subsequent to our handling we will be in touch with your office with developments as they occur. Should anything new develop from your end during the course of our handling, please let us know.

Again, thank you for using Equifax Services.

Sincerely,

A handwritten signature in cursive script, appearing to read "Andy" followed by a flourish and the initials "JRS".

Andrew E. Huy, Jr.
Surveillance Specialist
Cincinnati Regional Office
Phone (513)352-5680

AEH/ejc

2740

FEB 10 '94 09:50 KEARNEY ASSOCIATES

P.1/1

Kearney Associates, Inc.

Manufacturers' Representatives

FACSIMILE TRANSMISSION

TO: Mr. Harold Shelton
Jefferson Pilot

DATE: 2-10-94

PAGES TO FOLLOW: 0

MESSAGE: Confirming our phone conversation this
morning please change my address to which
all correspondence & checks are mailed to
effective immediately.
New Address:

CHRISTOPHER KEARNEY

Redacted

I thank you,
Chris Kearney

NOTE TO FACSIMILE OPERATOR: PLEASE DELIVER THIS FAX TO THE ABOVE PERSON(S). IF YOU DO NOT RECIEVE ALL THE PAGES IN GOOD CONDITION, PLEASE CONTACT KEARNEY ASSOCIATES AT THE ABOVE PHONE NUMBER.

2741

February 08, 1994

Equifax Services
Attn: Manager
PO Box 145492
Cincinnati, OH 45250-5492

RE: Policy H-493029 & H-538069 - Christopher Kearney

Dear Sir/Madam

Mr. Kearney is currently receiving residual disability benefits from our company. He states that he is unable to perform 70 to 80 percent of his occupation which is a manufacturer's representative for his own company called Kearney Associates, Inc.

Please do not interview Mr. Kearney. At this point, we would like for you to do a surveillance of his activities.

If additional information is needed, please give me a call.

Sincerely

Phyllis J. Harden
Claims Analyst
IHI Administration
Ext. #4922

PJH/fj

BY: XEROX TELECOPIER 7010 ; 3-30-94 11:56AM ;

CCITT G3→

1

MAR 30 '94 10:25 KEARNEY ASSOCIATES

P.1/4

Kearney Associates, Inc.

Manufacturers' Representatives

FACSIMILE TRANSMISSION

TO: Mr. Harold Shelton
Jefferson Pilot

DATE: 3-30-94

PAGES TO FOLLOW: 3

MESSAGE: Please process the following claim for
Policy # H 538069 and H493029. I am mailing
the original to you today. Please make sure
checks are sent to new address?

CHARLOTTE KEARNEY

Redacted

Thank you,
Chris Kearney

NOTE TO FACSIMILE OPERATOR: PLEASE DELIVER THIS FAX TO THE ABOVE PERSON(S). IF YOU DO NOT RECIEVE ALL THE PAGES IN GOOD CONDITION, PLEASE CONTACT KEARNEY ASSOCIATES AT THE ABOVE PHONE NUMBER.

2743

BY: XEROX TELECOPIER 7010 ; 3-30-94 11:58AM ;
R 30 '94 10:27 KEARNEY ASSOCIATES

CCITT G3+

4

P. 4/4

Power of Attorney

I, the undersigned, for the purposes of this claim, I hereby authorize any licensed physician, medical practitioner, hospital, clinic, or other medical or medical-related facility, insurance company, or other organization, institution or person, that has records or knowledge of my health, to give to the Jefferson-Pilot Life Insurance Company or any agent, attorney, consumer reporting agency or independent administrator acting on its behalf any such information. I hereby request and authorize Jefferson-Pilot Life Insurance Company to furnish all such information obtained by it to the policyholder's personal physician upon request and I hereby waive any privilege to such information. A copy of this authorization shall be as valid as the original. This authorization shall be valid for the duration of the claim.

I or my authorized representative is entitled to receive a copy of this authorization.

Date 3-30, 19 94 Claimant's Signature

Christopher L. Kearney

2744

E Q U I F A X
Claim Insurance Services

CONFIDENTIAL

SURVEILLANCE CLAIM

Acct: 405251

Cl/Pol #: H-493029 & H-538069
Requestor: PHYLLIS J. HARDEN
Assured:

Report On: KEARNEY, CHRISTOPHER L
Address: 12168 VILLAGE WOODS DRIVE
CINCINNATI, OH 45241

Occup: NOT SHOWN
Empl: KEARNEY ASSOCIATES, INC.
SSN:
DOB: Redacted

Report From: CINCINNATI
Phone #: (513)352-5600
FAX #: (513)352-5655
Dates: 02/17/94-02/11-02/08
Date Invest: 02/14/94

S T A T U S

Partial Report

Next Report By: 02/25/94

C I R C U M S T A N C E S

DATE OF ISSUE: 05/28/90. AMOUNT OF INSURANCE: \$1,062.50.
DATES OF DISABILITY: 02/05/93 TO PRESENT.
NATURE OF DISABILITY: LUMBOSACRAL SPINE SPRAIN WITH SUSPICION OF DISC INVOLVEMENT.

C L A I M H I S T O R Y - N O N E

P R E - S U R V E I L L A N C E

Registered in subject's name is a 1992 Pontiac with Ohio Registration EYU-729 which is due to expire on 11/09/94. This vehicle is registered to subject's address of 12168 Village Woods Drive, Cincinnati, Ohio 45241.

City Directories, Local Telephone Books and Directory Assistance were reviewed and they revealed the following information regarding Christopher L. Kearney.

All of the above show the subject as being listed at 12168 Village Woods Drive in Sharonville, Ohio, with a residential telephone number of (513)769-0512, and also list his business of Kearney Associates, Inc. with a work telephone number of (513)791-1185. Also listed is a physical location for this business of 10979 Reed Hartman Highway, Suite 125, Cincinnati, Ohio.

On Monday, 02/14/94, an investigator was in the area of 10979 Reed Hartman Highway at approximately 3:00 PM. This business is located in Reed Hartman Office Park and subject's suite is located in the basement. There are two entrances/exits to this office building and a parking lot which surrounds the building. The parking lot was canvassed; however, subject's 1992 Pontiac was not observed.

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Acct: 405251 QB: H-493029 & H-538069
Name: KEARNEY, CHRISTOPHER L
Claim Investigation Report (Continuation)

Page 2

The investigator then proceeded to the subject's residence at 12168 Village Woods Drive in Sharonville, Ohio. Upon pulling onto Village Woods Drive, the investigator observed a Ford Pickup pulling directly behind him and upon passing the subject's residence this Ford Pickup pulled into the driveway of subject's residence and into the garage. In looking through the rear-view mirror this investigator observed a male individual with black hair who was approximately 6' tall, medium build walk out of the garage. He was wearing what appeared to be a brown leather waist-length jacket with dark colored dressed pants. This individual was later identified to be the subject. Please note that this vehicle traveled in the same direction from the location of the subject's business.

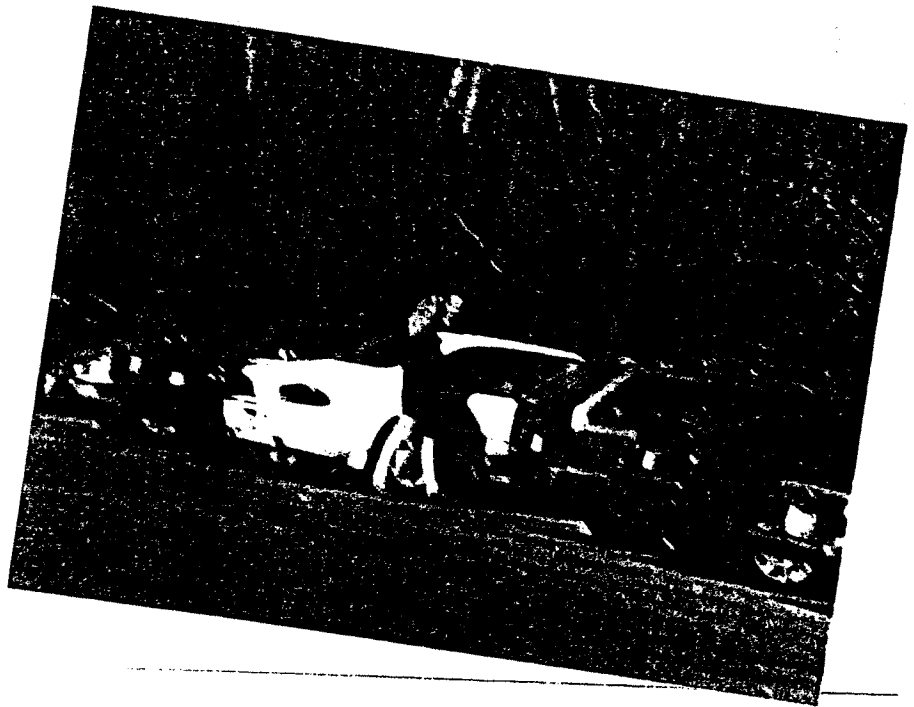
Your subject's home is a two-story home and it is fairly new. It is located in an upper-middle-income and upper-income neighborhood. The houses in and around this area sell from \$300-500,000.

C O N T I N U E D H A N D L I N G

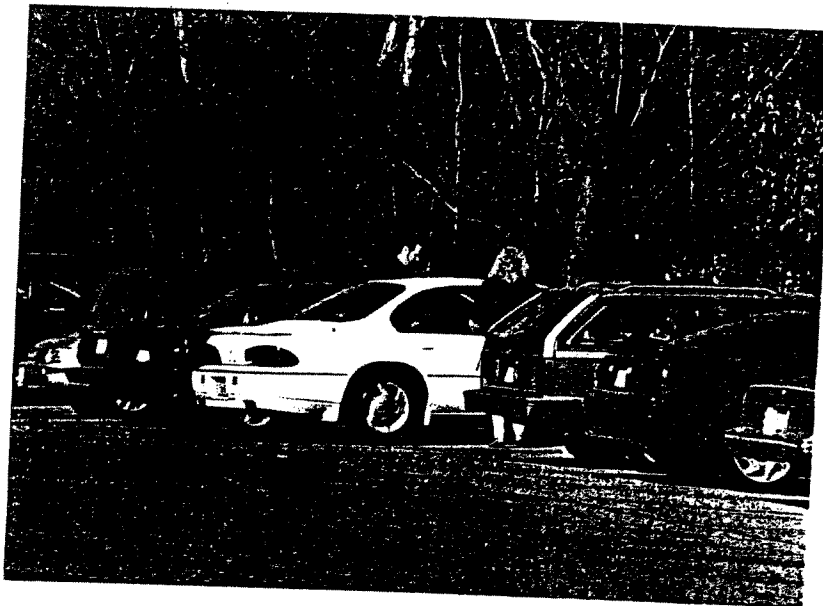
(1) A surveillance will be conducted on the subject, Christopher L. Kearney, on Wednesday (02/23/94) and Thursday (02/24/94), as requested.

A. E. Huy, Jr.
Surveillance Specialist
Phone (513)352-5604

AEH/ejc



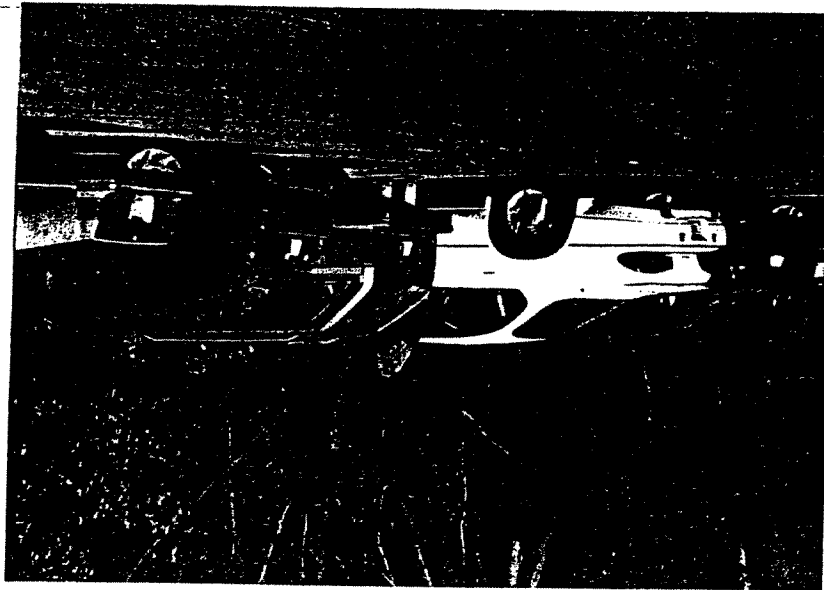
2-18-94
SUBJECT DEPARTING his office



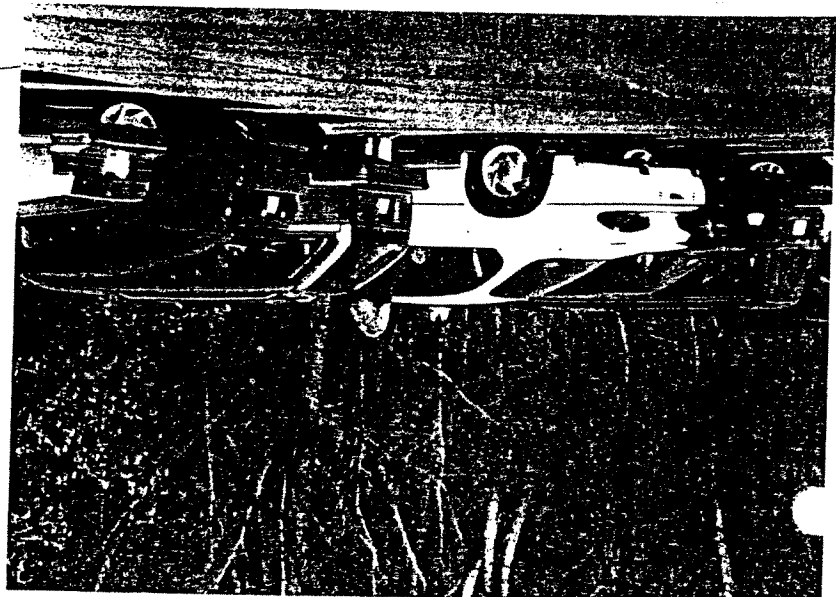
SAME AS ABOVE

SAME AS ABOVE

2749



SAME AS ABOVE





2-21-94
SUBJECT ARRIVING AT OFFICE

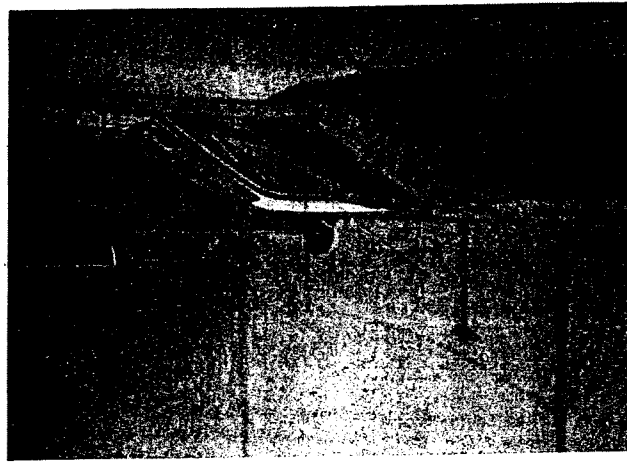


SAME AS ABOVE

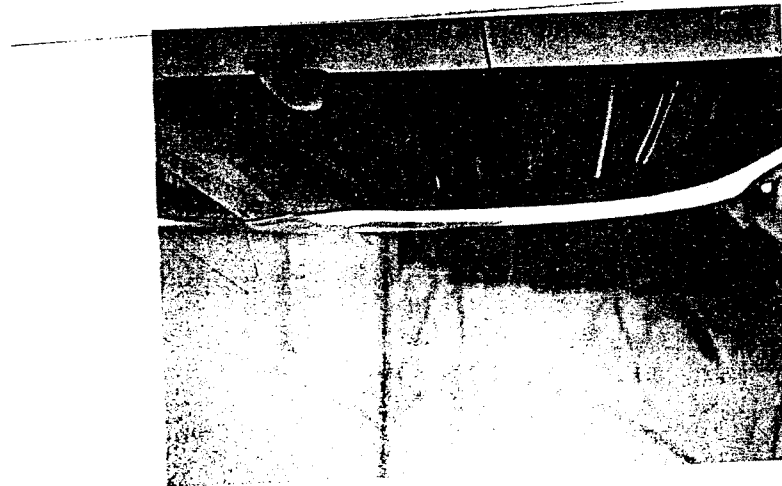
2750

same as above

2751



same as above



EQUIFAX CLAIM INQUIRY
The
Information
Source

Acct. 405-251

- ☐ Claimant Statement (Arranged)
☐ Claimant Statement (Unannounced)
☐ Hospital and/or Physician Only
☒ Limited Pointed Investigation
- ☐ Special Investigation
☐ Accidental Death
☐ Surveillance
☐ Accident Claim
- ☐ Disability Claim
☐ Sickness Claim
☐ Continuance of Disability
☐ Lay Progress

Field Rep: Make report requested following instructions on reverse. Give special attention to any point(s) shown below. If any doubt how to proceed, contact requester.

Date Requested 02-08-94	Requester Phyllis J. Harden	Requester's Tel. No. (910) 691-4922	Requester's FAX No. (910) 691-4254
Claim, Policy No. or Other File Identification H-493029 & H-538069			If any Special Billing ID, Sort Code
Report on - Last Name - First - Middle (Initial) Kearney, Christopher L.		Date of Birth, or Age Redacted	If Dependent, Insured's Name
Residence Address Redacted			Telephone No., if Available
Occupation		Employer Kearney Associates, Inc.	
Business Address 10979 Reed Hartman Hwy. Cincinnati OH		Date Insured 5/28/90	Mo. Ind. or Amt. of Ins. \$1,062.50

Claim is For:

- A. ☐ Loss of Time or Income B. ☐ Hospitalization C. ☐ Death or Dismemberment D. ☐ Other

Disability Claimed

If An Accident or Death, Give Date, Place & Type

FROM: 2/5/93 TO: current

Nature of Disability/Cause of Death

Lumbosacral spine sprain w/suspicion of disc involvement

Hospital(s) - Name, City & Dates Confined

Attending Physician(s) - Name & Address

Have Hospital Records?	Interview Physician(s)?	Obtain Physician's Records?	Contact Employer?	Interview Claimant if Feasible?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Name any Attorney, Person(s) or Other Entity Who Should Not Be Contacted.

Requester: Check service desired above (see over for description), complete remainder & check any appropriate special attention block(s) below and/or add any special instructions below, or include letter. If medical contacts necessary, attach authorizations if available, to conserve time & charge.

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Onset of condition causing disability. | <input type="checkbox"/> Exact daily duties prior to disability. | <input type="checkbox"/> Current medical treatment and/or medication. | <input type="checkbox"/> Other insurance/benefits being received. |
| <input type="checkbox"/> Medical history prior to date insured. | <input type="checkbox"/> Circumstances surrounding alleged accident. | <input type="checkbox"/> Activities, restrictions/limitations, anticipated return to work date. | <input type="checkbox"/> Level of education, all prior occupations, any special training. |
| <input type="checkbox"/> Monthly earned income prior to disability. | <input type="checkbox"/> Exact date ceased work due to disability. | <input type="checkbox"/> Other (specify): | |

Form 41-7-98 Equifax Services Inc. USA

405-251
MANAGER
INDIVIDUAL HLTH CLAIMS
JEFFERSON-PILOT LIFE INS
P O BOX 21008
GREENSBORO NC 27401

* 2 day surveillance on weekdays.

2752

Christopher L. Kearney

Redacted

**Mr. Robert W. Maxwell
Supervisor of Claims
Jefferson-Pilot
PO Box 21008
Greensboro, NC 27420**

January 26, 1994

RE: Policy H-493029 & H-538069

Dear Mr. Maxwell:

I received a copy of your most recent letter of 1/18/95 to my Accountant, Thielen & Company. I have forwarded information to Thielen & Company concerning the payment of commissions to another sales representative in 1993. Also, I have forwarded copies of invoices from the computer firm which was paid for computer training in 1993. Thielen & Company will reply to you within a few days.

I am enclosing a copy of my 1994 W-2. The original has been sent to the IRS.

Per your request of 1-18-95, I have asked Thielen & Company to forward copies of my 1994 personal and 1995 Kearney Associates, Inc. corporate tax returns when they are available. These will take at least a month and probably longer to be completed.

Mr. Maxwell, I do not agree that Jefferson Pilot is making every effort to process this claim as soon as possible. This claim was sent to you on Nov. 1, 1994. I did not receive your first letter of 11/8/94 until Nov. 28, 1994. Obviously it was not sent until after I called you in late November to check on the status of the claim. Also, several letters of correspondence from your office were sent to my previous address even though I have put my current address on previous communication. This further delayed the claim.

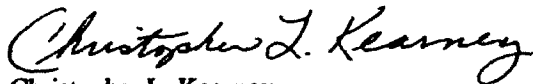
Even though my accountant has responded promptly and completely to each of your three previous requests for additional and sometimes redundant information, I am now being asked by Jefferson-Pilot for tax returns which are not available yet and certainly were not available last November when the claim was initiated. In my view, Jefferson-Pilot will continue to make further requests for information and stall payment on my claim. If this claim is being held up because of inexperience on your part, Mr. Maxwell, I request that this claim be handled directly by someone at Jefferson-Pilot who has experience with this type of claim.

My accountant has twice verified my income in 1994 and now you have my W-2. I do not think that it is reasonable for me to wait any longer for payment by Jefferson-Pilot. As I have for years, I have continued making my monthly premium payments to Jefferson-Pilot.

My employer, Kearney Associates, Inc., has just been terminated for lack of production by a major, long-time principal. This is directly related to my current medical condition. Waiting for Jefferson-Pilot to pay this claim and the stress involved further complicates my recovery.

After waiting almost three months, I would appreciate payment now from Jefferson Pilot. Further stalling by Jefferson-Pilot will prompt me to make a formal complaint to the Ohio Dept. of Insurance.

Very truly yours,

A handwritten signature in cursive script that reads "Christopher L. Kearney".

Christopher L. Kearney

cc: Charles Melville, Strauss & Troy
Harold Duryee, Director, Ohio Dept. of Insurance

Mr. Robert Maxwell
Jefferson Pilot- Claims Dept..
P.O. Box 21008
Greensboro, NC 27420

March 18, 1995

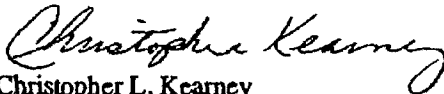
RE: Policy H-493029 & H-538069

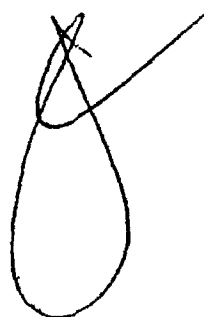
Dear Mr. Maxwell:

Enclosed is the 1994 Kearney Associates, Inc. federal tax return which you have requested. I will forward my personal return when it is completed.

Please call me if you have any questions.

Very truly yours,


Christopher L. Kearney



Christopher L. Kearney

Redacted

Mr. J.L. Roberson
V.P. Jefferson-Pilot
PO Box 21008
Greensboro, NC 27420

March 8, 1995

RE: Policy H-493029 & H-538069

Dear Mr. Roberson:

Thank you for your letter of February 8, 1995. I have received the benefit checks you mentioned in your letter- thank you.

As you request, we will forward copies of my 1994 personal and corporate tax returns to Jefferson Pilot after they are completed. I hope to have those in the next few weeks.

To date, I believe that I have fully complied with my contractual obligation to present "reasonable proof" of both my current and prior monthly income.

Please contact me if you should require additional information.

Very truly yours,


Christopher L. Kearney

cc: Charles Melville, Strauss & Troy

2788

Jefferson-Pilot
Life Insurance Company
PO Box 21008
Greensboro, NC 27420
Bus 910 691 3000

COPY OF ORIGINAL

February 24, 1995

**Jefferson
Pilot**

INSURANCE • FINANCIAL SERVICES

Donna Judd, PhD.
6721 Kaul Road
Columbis, OH 43229

RE: Policy H-493029 & H-538069 - Christopher L. Kearney

Dear Dr. Judd

Thank you for completing the attending physician's statements for Mr. Kearney due to his disability of major depression.

We are currently auditing his claim as would appreciate your sending us copies of your office records pertaining to any treatment of Mr. Kearney.

Your cooperation is appreciated. An authorization for release of this information is enclosed along with a business reply envelope for your use.

Sincerely

Phyllis J. Harden
Claims Analyst
IHI Administration - 4170
Ext. #4922

PJH/fj

2790

Jefferson-Pilot
Life Insurance Company
PO Box 21008
Greensboro, NC 27420
Bus 910 681 3000

February 24, 1995

**Jefferson
Pilot**

INSURANCE / FINANCIAL SERVICES

M. Lehenbauer, MD
770 Reading Road
Mason, OH 45040

RE: Policy H-493029 & H-538069 - Christopher Kearney

Dear Dr. Lehenbauer

We are currently auditing a disability claim for Christopher L. Kearney.

In order that further consideration be given his claim, we will appreciate your sending us a copy of your office records pertaining to any treatment of Mr. Kearney.

Your cooperation is appreciated. An authorization for release of this information is enclosed along with a business reply envelope for your use.

Sincerely

Phyllis J. Harden

Phyllis J. Harden
Claims Analyst
IHJ Administration - 4170
Ext. #4922

PJH/fj

Christine
\$2500 ✓ on copying fee!
OK
my

2793

February 10, 1995

Christopher L. Kearney
12168 Village Woods Drive
Cincinnati, OH 45241

RE: Policy H-493029 & H-538069

Dear Mr. Kearney

This letter will confirm our telephone conversation of February 07, 1995 when I explained our checks for \$11,200 and \$19,250 dated February 07, 1995 which we trust you have now received were forwarded to you with the understanding that you will forward a copy of your 1994 personal federal tax returns and a copy of your 1995 business federal tax returns as soon as possible.

I further explained that we may ask our accountant to review the records of your business.

Sincerely

Robert W. Maxwell, ALHC
Supervisor of Claims
IHI Administration - 4170
Ext. #4371

RWM/fj

c: Timothy J. Boone

FEB 06 '95 14:57 KEARNEY ASSOCIATES

P.1/1

Christopher L. Kearney

Redacted

Mr. Robert W. Maxwell
Supervisor of Claims
Jefferson-Pilot
PO Box 21008
Greensboro, NC 27420

February 6, 1995

RE: Policy H-493029 & H-538069

VIA: Facsimile

Dear Mr. Maxwell:

I called you this morning to again inquire about the status of my claim on the above policies. You have now had this for over 90 days. You told me that you, just this morning after my phone call, have taken my file to the dept. supervisor. You received my letter of 1/26/95 on Monday of last week.

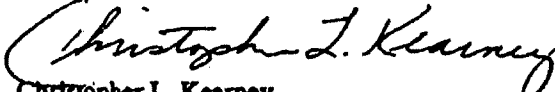
You did not phone me back as you said you would so I called again this afternoon. Now you tell me that it is in the hands of the dept. supervisor and it may be tomorrow before you get back to me. Frankly, Mr. Maxwell, I have heard that before from you and I believe that this is just another stall technique that Jefferson-Pilot is using.

On my previous claim when I had back surgery, I was sent a check in less than 30 days. I expect the same service on this claim.

If I do not receive a check from Jefferson-Pilot by Friday, February 10, 1995, I will be making a formal complaint with the Ohio Dept. of Insurance. Also, I will discuss legal action with my attorney on Monday, February 13, 1995.

Please take this message to the appropriate people at Jefferson-Pilot.

Very truly yours,


Christopher L. Kearney

cc: Charles Melville, Strauss & Troy

2799

FEB 06 '95 15:28

PAGE. 01

January 18, 1995

Edward P. Thielen, Jr.
Thielen & Company
10999 Reed Hartman Highway
Cincinnati, OH 45242

RE: Policy H-493029 & H-538069 - Christopher Kearney

Dear Mr. Thielen

Thank you for the information in which you have furnished regarding Mr. Kearney's disability claim.

We have referred his claim to our CPA and questions did arise regarding the commissions of \$4,100 and the computer training expenses totalling \$14,450. Therefore, we need to know when these corporate expenses were incurred during 1994.

We also need a copy of Mr. Kearney's 1994 IRS returns and his 1995 corporate returns.

Your assistance will be appreciated.

Sincerely

Robert W. Maxwell, ALHC
Supervisor of Claims
IHI Administration - 4170
Ext. #4371

RWM/fj

c: Christopher Kearney

P.S. - Mr. Kearney, please be assured that every effort is being made to complete your claim on the earliest possible date and your assistance will be appreciated by asking your accountant to furnish us with the information requested above.

2803

FEB 08 '95 08:29 KEARNEY ASSOCIATES

P. 1/4

Christopher L. Kearney

Redacted

Mr. J.L. Roberson
V.P. Jefferson-Pilot
PO Box 21008
Greensboro, NC 27420

RE: Policy H-493029 & H-538069

VIA: Facsimile, 9:00 AM

Dear Mr. Roberson:

Mr. Maxwell told me yesterday that you have reviewed the claim I faxed to Mr. Maxwell on 10/31/94- over three months ago. I have sent numerous documents, and made many many phone calls- still with no checks from Jefferson-Pilot.

Mr. Maxwell said that Jefferson-Pilot considers this claim to be a continuation of a previous claim. If so, there is no further elimination period and I should be paid in full according to the terms on page 3 (A) (III) of my policy- following is a copy for your quick review. Also, following are copies of the schedule for each policy.

~~Mr. Maxwell told me that there is a 24 month limitation on my benefits- as I am under 55 years old- this is not the case.~~

I expect to be paid in full according to the terms in our contracts immediately. I expect payment for the months listed on my application sent to you well over three months ago.

I expect to receive 2 checks (1 for each policy) by Friday, Feb. 10, 1995 even if they must be hand delivered. Please reread my latest 2 letters to Mr. Maxwell. If I do not receive these checks by Friday, I will make a formal complaint with the Ohio Dept. of Insurance. In addition, I will have my attorney start the necessary legal proceedings to uphold these contracts with Jefferson-Pilot Insurance.

Very truly yours,

Christopher L. Kearney
Christopher L. Kearney

cc: Charles Melville, Strauss & Troy
Robert Maxwell, Jefferson-Pilot

2804

FEB 08 '95 09:00

PAGE.01



Callaghan Nawrocki PC
CERTIFIED PUBLIC ACCOUNTANTS

12/11


FAX

Date: December 10, 1996

Number of pages including cover sheet: 3

To: Mr. JL Roberson

Jefferson Pilot Life Insurance Co.

Phone:

Fax phone: (910) 691-4254

cc:

From: Ernest Patrick Smith

Callaghan Nawrocki, PC

Phone: (516) 756-9500

Fax phone: (516) 756-9818

REMARKS:



Urgent



For your review



Reply ASAP



Please comment

The pages accompanying this facsimile transmission contain information from Callaghan Nawrocki, LLP which is confidential and/or privileged. The information is intended to be for the use of the individual(s) or entity(ies) named on this cover sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this information is prohibited. If you have received this facsimile in error, please notify us by telephone (516) 756-9500 immediately and return the original document to us by regular mail.

2812

- From:

Name: Chris Kearney
Company: Kearney Associates, Inc.
Phone: (513) 769-5885
Fax: (513) 769-0818

Name: Ms. Phylis Harden
Company: Jefferson Pilot- Claims Dept.
Phone: (910) 691-3000
Fax: (910) 691-4254

Total number of pages, including cover: 1

- Message:

Please process the following Supplemental Disability Claim Report for Policy #H-493029 and H-538069. I am mailing the originals to you today. Thank you.

FAXED
on 12-3-96



Callaghan Nawrocki LLP
CERTIFIED PUBLIC ACCOUNTANTS

225 Broad Hollow Road
Melville, New York 11747

516/756-9500

152 West 57th Street
New York, New York 10019

212/245-1190

December 2, 1996

VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

Mr. Christopher Kearney

Redacted

Re: Jefferson Pilot Life Insurance Company
Policy Numbers: H 493029 & H 538069

Dear Mr. Kearney:

Please be advised that Jefferson Pilot Life Insurance Company has retained the firm of Callaghan Nawrocki to assist them in analyzing the financial aspects pertaining to your claim for disability benefits pursuant to the above captioned policy. Our intention is to complete the required analysis in a most efficient and effective manner. As such, we will be completing the required procedures at a place where your records are located.

In addition to the information submitted to date, we would also request the following information be forwarded to our office prior to our field visit:

- (1) Form 1040 - U.S. Individual Income Tax Returns for Christopher Kearney for calendar years 1990 through 1995.
- (2) Form 1120 - U.S. Corporation Tax Returns for Kearney & Associates, Inc. for fiscal years ended January 31, 1991 through January 31, 1993.
- (3) Monthly profit and loss statements for Kearney & Associates for February 1993 through November 1996.

2815

Callaghan Nawrocki, Certified Public Accountants

Callaghan Nawrocki LLP

Mr. Christopher Kearney

December 2, 1996

Page 2

Re: Jefferson Pilot Life Insurance Company
Policy Numbers: H 493029 & H 538069

In addition to the above requested, we would also ask that you provide the following information at the time of our field visit:

Access to any and all of your billing records for Kearney & Associates, Inc. for the calendar years 1990 through the present:

- (1) Copies of billings for professional services rendered
- (2) Appointment calendars
- (3) Cash receipts and disbursement journals
- (4) Access to bank statements, check stubs, deposit slips and canceled checks for the accounts maintained by the Business

In addition to the above requested information, we would like to request a meeting at some point during our field visit to speak with the insured regarding the operation of the Business.

Upon receipt of this request, kindly contact my Long Island office at (516) 756-9500 so that we may schedule a mutually convenient time for us to meet in order to complete the required analysis of the aforementioned financial and other related documentation.

Very truly yours,
CALLAGHAN NAWROCKI, PC



By: Ernest Patrick Smith

EPS:emr

cc: J.L. Roberson
Jefferson Pilot Life Insurance Company
(Sent via facsimile @ 910-691-4254 - December 10, 1996)

2816

Callaghan Nawrocki, Certified Public Accountants

Mr. Ernie Smith
November 19, 1996
Page 2

If after reviewing these materials, you need any additional information, please let me know. Your assistance in the investigation of this claim will be appreciated.

Sincerely,

J. L. Roberson

JLR:mds

Enclosures

November 19, 1996

Mr. Ernie Smith
Callaghan, Nawrocki
225 Broad Hollow Road
Melville, NY 11747

RE: Policies H-493029 & H-538069
Christopher Kearney

Dear Mr. Smith:

In accordance with our telephone conversation, we are enclosing a copy of the application for the two policies mentioned above, a specimen of the policy form issued, the initial claim form, and monthly statements regarding Mr. Kearney's reported income. Also, enclosed is a copy of the form which was the basis for removal of an exclusion rider from the policy, H-538069.

Policy H-493029 was issued effective May 28, 1990. The policy provides a basic benefit of \$2,125 plus a Social Security Supplement of \$525. It includes a seven percent cost-of-living adjustment rider and a residual disability benefit rider. The policy originally excluded back disorders but this restriction was removed as indicated above. Policy H-538069 was issued effective May 28, 1991 (I erroneously advised 1990). This policy provides a basic benefit of \$1,375 with a \$225 Social Security Supplement. It also includes residual disability and a C.O.L.A. rider. This policy is still in the contestable period.

Disability benefits have been paid since May 6, 1993 including the adjustments, we are paying \$5,566.50 currently each month. The initial cause was reported as a lumbosacral spine strain and later changed to depression. Total disability benefits were paid from May 6, 1993 to April 1, 1994. Residual disability has been paid since that date with the last payment covering the period from October 1 to November 1, 1996. Based on his reported income, full benefits have been paid.

FAX Transmittal

Jefferson-Pilot
Life Insurance Company
PO Box 21008
Greensboro, NC 27420

Jefferson
Pilot

Date 11-15-96**CONFIDENTIAL****Message To:**Name: Ernie SmithCompany: Callaghan, NawrockiFAX Number: (516) 756-9818**Message From:**Name: J. L. RobersonPhone Number: 910-891-4269Department/Responsibility Center Number: IHL Adm/4170FAX Number: 910-891-4254Number of pages including cover sheet: 63

Message: Copies of tax forms and the latest Equifax
activities check. Please look these over. I look
forward to hearing from you on Monday.